



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)
Indiana Election Commission (IC 3-9-5-14)

(CFA-4)

Summary Sheet

FILE NUMBER
TOTAL PAGES IN ENTIRE CFA-4 REPORT
1 of 1

INSTRUCTIONS: Please type or print legibly **IN BLACK INK** all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT? ☐ Yes ☐ No

COMMITTEE INFORMATION			
1. Full Name of Committee (as on Statement of Organization) Thurl T Cecil, Campaign For Coroner		<input type="checkbox"/> Check if this is a new name	
2. Acronym or Abbreviated Name (if any) N/A		3. Committee Telephone Number (317) 984-4472	
4. Mailing Address (address where all campaign finance correspondence is received) 507 Red Fox Run		<input type="checkbox"/> Check if this is a new address	
5. City, State, ZIP Code Arcadia, Indiana 46030		6. Party Affiliation (if applicable) Republican	
CANDIDATE INFORMATION (For Candidate's Committees Only)			
7. Full Name of Candidate (include any nickname) Thurl Truman Cecil Jr.		8. Party Affiliation or If Independent Candidate Republican	
9. Office Sought (Include district number, if any. Not required for exploratory committee.) Coroner of Hamilton County		10. County of Residence Hamilton	
TYPE OF REPORT		CONVENTION CANDIDATES ONLY	
11. Check one: <input type="checkbox"/> Pre-Primary <input type="checkbox"/> Pre-Election <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Nomination <input type="checkbox"/> Other _____ <input type="checkbox"/> Final/Disbands Committee (lines 18, 19, and 20 must be "0") <input type="checkbox"/> Outgoing Treasurer (within 10 days amend Statement of Organization)		Check one: <input type="checkbox"/> Pre-Convention <input type="checkbox"/> Post-Convention	
12. Reporting Period: From 01/01/2015 Through 12/31/2015		COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.		26.09	
14. Cash on hand and investments January 1, current year.			26.09
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)			
15a. Itemized (use Schedule A)		0	0
15b. Unitemized		0	0
15c. Add lines 15a and 15b in both columns SUBTOTAL		0	0
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B TOTAL		26.09	26.09
EXPENDITURES			
(Note: These amounts include in-kind expenditures and loan repayments.)			
17a. Itemized (use Schedule B) (Public Question: use Schedule C)		0	0
17b. Unitemized		0	0
17c. Add lines 17a and 17b in both columns SUBTOTAL		0	0
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns) TOTAL		26.09	26.09
19. Debts OWED BY the committee (use Schedule D)		0	
20. Debts OWED TO the committee (use Schedule E)		0	

SIGNATURE	
I, Treasurer , certify that the information furnished on this report is true and correct to the best of my knowledge and belief it is true, correct and complete.	
Title Treasurer	Date 12-22-15
	Date 12-22-15

for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly provides false information to the Indiana Election Commission and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)

FOR OFFICE USE ONLY

2015 DEC 22

2015 DEC 22